

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled TISSUE REPAIR SYSTEM, the specification of which:

is attached hereto.
 was filed on _____ as Application Serial No. _____ and was amended on _____
 was described and claimed in PCT International Application No. _____ filed on _____
and as amended under PCT Article 19 on _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Phyllis K. Kristal, Reg. No.38,524
Peter J. Devlin, Reg. No. 31,753
John F. Hayden, Reg. No.37,640
Joel R. Petrow, Reg. No. 30,886
Earl Douglas, Reg. No. 31,723

Timothy A. French, Reg. No.30,175
John N. Williams, Reg. No.18,948
George K. Stacey, Reg. No. 35,688
Bill Clemons, Reg. No. 32,558
John F. Conroy, Reg. No. 45,485

Address all telephone calls to PHYLLIS K. KRISTAL at telephone number (202) 783-5070.

Address all correspondence to JOEL R. PETROW at:

SMITH & NEPHEW NORTH AMERICA
1450 Brooks Road
Memphis, TN 38116

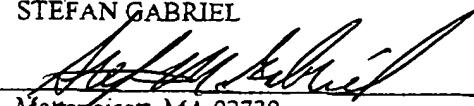
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name of Inventor: DENNIS COLLERAN
Inventor's Signature: Dennis Colleran
Residence Address: North Attleborough, MA
Citizenship: United States of America
Post Office Address: 234 Old Wood Road South
North Attleborough, MA 02760

Date: 11/02/01

Combined Declaration and Power of Attorney
Page 2 of 2 Pages

Full Name of Inventor: STEFAN GABRIEL

Inventor's Signature: 

Date: 11/02/01

Residence Address: Mattapoisett, MA 02739
Citizenship: United States of America
Post Office Address: 7 Alderberry Lane
Mattapoisett, MA 02739

40072271.doc